

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

021756-005300U.S
10/1731623

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS | 24 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 24 minus 20= | * 4 |
| INDEPENDENT CLAIMS | 3 minus 3 = | * - |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

| | | | |
|-----------|--------|--------------|--------|
| RATE | Fee | RATE | Fee |
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| X\$ 9= | | OR X\$18= | 72 |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL | | OR TOTAL | 824 |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|---------------------------------------|
| | | | | RATE ADDITIONAL FEE |
| Total | * 24 | Minus | ** 24 | = <input checked="" type="checkbox"/> |
| Independent | * 3 | Minus | *** 3 | = <input checked="" type="checkbox"/> |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> | |

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

| | | | |
|----------------------------|-------------------|-------------------------------|-------------------|
| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR X\$18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDITIONAL FEE | | OR TOTAL ADDITIONAL FEE | |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|----------------------------|
| | | | | RATE ADDITIONAL FEE |
| Total | * <input type="checkbox"/> | Minus | ** <input type="checkbox"/> | = <input type="checkbox"/> |
| Independent | * <input type="checkbox"/> | Minus | *** <input type="checkbox"/> | = <input type="checkbox"/> |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> | |

| | | | |
|----------------------------|-------------------|-------------------------------|-------------------|
| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR X\$18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDITIONAL FEE | | OR TOTAL ADDITIONAL FEE | |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|----------------------------|
| | | | | RATE ADDITIONAL FEE |
| Total | * <input type="checkbox"/> | Minus | ** <input type="checkbox"/> | = <input type="checkbox"/> |
| Independent | * <input type="checkbox"/> | Minus | *** <input type="checkbox"/> | = <input type="checkbox"/> |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> | |

| | | | |
|----------------------------|-------------------|-------------------------------|-------------------|
| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR X\$18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDITIONAL FEE | | OR TOTAL ADDITIONAL FEE | |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.